

County of San Diego Department of Parks and Recreation

VOLUNTEER PRE-APPLICATION



| NAME: | | | | | | | | | | |
|---|--------------|------------------|----------|------------|----------|------------------|--------|---------------|----------|--|
| HOME PHONE: | () | | | | ALT PHO | NE: | () | | | |
| ADDRESS: | | | | | | | | | | |
| | Street | | | | City | | State | | Zip | |
| E-DRESS | | | | | | | | | | |
| CURRENT OCCUPAT | TION: | | | | | | | | | |
| Have you served as a Department Parks and Recreation Volunteer? | | | | | | | | | Yes / No | |
| If 'Yes', please list lo | cations an | d approxim | ate date | es below: | | | | | _ | |
| Volunteer position you are seeking (please check one): | | | | | | | | | | |
| Community Center | Ran | ch Hand | Intern | | Т | Student/ Service | | Т | Π | |
| Recreation | Doc | Docent/Naturalis | | Park Patro | ol | Trail Patrol | | | | |
| Resident Volunteer | Histo | ory Assistant | | Other | | | | | | |
| Highlight your education and employment background/experiences that you feel may contribute to the County Parks and Recreation Volunteer Program (You may attach a resume). | | | | | | | | | | |
| | | | | | | | | | | |
| List three (3) persons | s not relate | ed to you wl | | | quality. | | | | | |
| Name: | | | Phone : | | | Relationship: | | | | |
| Name: | | | | | | | | Relationship: | | |
| Name: | | | | | | | | Relationship: | | |
| California State Law requires all Volunteers, paid or non-paid, be subject to background checks. | | | | | | | | | | |
| Are you willing to submit to a background check? | | | | | | | | | Yes / No | |
| ** FOR RESIDENT VOLUNTEER APPLICATIONS ONLY ** | | | | | | | | | | |
| Are you willing to commit to one of the following time frames for service? | | | | | | | | | | |
| 3 mos: Yes No 6 mos: Yes No | | | , | | | | Other | Other | | |
| Indicate type of equipment and length (check type): | | | | | | | | | | |
| Motorhome: | | | Trailer | | | Extra Vel | hicle: | | | |
| Length: | Length: | | Length: | | | Make/Model | | | | |
| PETS: If applicable, indicate types and number of pets you will have with you. (You must have proof of your pets' current rabies vaccination with you while you reside in the park as a resident volunteer.) | | | | | | | | | | |
| Dogs: | Cats | Cats: | | ther: | | Туре: | | | | |
| | | | | ** CERTIF | ICATION | ** | | | | |
| I understand that additional information, such as driver's license, Social Security Account Number and a background check is required for volunteer positions. I hereby certify that all statements made on this Pre-Application are true and complete. | | | | | | | | | | |
| Signature: | | | | | | | | | Date: | |
| | | | | | | | | | | |

Please submit to Volunteer Coordinator, San Diego County Department of Parks and Recreation